

## OFFICE OF PUBLIC INSTRUCTION

PO BOX 202501 HELENA MT 59620-2501 www.opi.mt.gov (406) 444-3095 (888) 231-9393

(406) 444-0169 (TTY)

Linda McCulloch Superintendent

July 2006

To: School Food Authority Administrators – Milk Only Program

From: Christine Emerson, Director

**School Nutrition Programs** 

Re: Administrative Update

It is once again time to update and submit your Sponsor and Site Information Sheets in the School Nutrition Programs software at <a href="www.opi.mt.gov/schoolfood/index.html">www.opi.mt.gov/schoolfood/index.html</a>. You may update this information anytime before **September 10, 2006** when your first Claim for Reimbursement for the 2007 school year is due.

Once you log into the software, click on Program Year 2007. Much of the information is carried over from last year, so it will not be time-consuming to complete as it was last year. Please take time to ensure that all information included on the Sponsor and Site Information Sheets is correct.

The majority of the information and forms to assist you in meeting the annual requirements of the School Nutrition Programs are available on the School Nutrition Programs website in the Lunch, Breakfast, Snacks and Milk page. Please download and print the forms for your district's use. The Letters to Households are available in Word so you may include your district's letterhead.

If you need assistance, please contact Holly Humphrey at (406) 444-4413 or <a href="mailto:hhumphrey@mt.gov">hhumphrey@mt.gov</a>; Lori Rittel at (406) 444-4416 or <a href="mailto:lrittel@mt.gov">lrittel@mt.gov</a>; or Kim Pullman at (406) 444-3532 or <a href="mailto:kpullman@mt.gov">kpullman@mt.gov</a>.

**Enclosures** 

## DAILY RECORD FORM SPECIAL MILK PROGRAM

Date	Milk Purchased	Cost	Paid & Non- Pricing Milk	Free Milk	Adult Milk
Total					
Milk Remaining:			•		

## **INSTRUCTIONS**

Milk Carry-Over: Record the number of half pints remaining from the previous month.

**Date:** Record the date of each milk service. If August and June operate for less than 10 days, record the numbers on the September and May claims.

**Milk Purchased:** Record the number of half pints purchased/delivered under the appropriate date. Record the total purchased/delivered for the month on the bottom of the form.

**Cost:** Record the invoice cost of milk purchased. Record the average cost per half pint (total cost divided by total number served) on the monthly claim.

**Paid & Non-Pricing Milk:** Record the number of half pints served to students not eligible for free milk or in non-pricing programs. *Though milk is served at no cost to students in non-pricing programs, it is not reimbursed at the free rate.* 

**Free:** Record the number of half pints served to students with approved applications for free milk. **Adult Milk:** Record the number of half pints served to adults or for other non-reimbursable use. The

minimum charge should be the cost of the milk.

**Milk Remaining:** Record the number of half pints remaining on the last day of the month. Transfer the number to the Milk Carry-Over section on the Daily Record Form for next month.